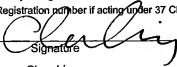


PTO/SB/22 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031

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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2006</b> (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 108298743US	
Application Number      10/713,626-Conf. #2439		Filed      November 13, 2003	
For      MICROELECTRONIC DEVICES HAVING CONDUCTIVE COMPLEMENTARY STRUCTURES AND METHODS OF MANUFACTURING MICROELECTRONIC DEVICES HAVING CONDUCTIVE COMPLEMENTARY STRUCTURES			
Art Unit      2811		Examiner      J. M. Im	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		<u>Fee</u>	<u>Small Entity Fee</u>
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$120	\$60      \$ _____
<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$450	\$225      \$ 450.00
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1020	\$510      \$ _____
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1590	\$795      \$ _____
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080      \$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input checked="" type="checkbox"/> Payment in the amount of \$950.00 is submitted by Electronic Funds Transfer.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-0665</u> .			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.			
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input type="checkbox"/> attorney or agent of record. Registration Number _____			
<input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34.			
		Registration number if acting under 37 CFR 1.34	<u>51,945</u>
 _____ Signature		_____ April 26, 2007 Date	
_____ Chen Liang Typed or printed name		_____ (206) 359-8000 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.			